

CLAIMS ONLY

SERIAL NO. _____ FILING DATE _____

APPLICANT(S) _____

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	/					
2		/				
3	/					
4		/				
5	/					
6		/				
7		2				
8		2				
9	/					
10		/				
11	/					
12	/					
13		/				
14	/					
15		(1)				
16	/					
17	/					
18		/				
19		(1)				
20		(1)				
21		(1)				
22	/					
23		/				
24	/					
25		/				
26	/					
27		/				
28		2				
29		2				
30	/					
31		/				
32		/				
33						
34						
35						
36						
37						
38						
39						
40		(1)				
41		(1)				
42		(1)				
43		(1)				
44		X				
45						
46						
47						
48						
49						
50						
TOTAL IND.	18		18			
TOTAL DEP.	53	←	29	←	←	←
TOTAL CLAIMS	51	47				

	*		*		*	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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98						
99						
100						
TOTAL IND.					↓	
TOTAL DEP.					↓	
TOTAL CLAIMS					↓	

* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS